ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

P.O. Box 70108
Tucson, AZ 85737



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MAY 1 5 2006

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

ANNUAL REPORT

FOR YEAR ENDING

12 31 2005

FOR COMMISSION USE

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Ontered 515-06 RF

COMPANY INFORMATION

	nod noch Weddedon IIC	
Company Name (Business Name)	Red Rock Utilities, LLC	
Mailing Address 2200 E. River	Road, Suite 115	
(Street)		
Tucson	Arizona	85718
(City)	(State)	(Zip)
(520) 577-0200	(520) 299-5602	(520) 602-5288
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address <u>biannarino@diamon</u> Local Office Mailing Address <u>P</u>	.0. Box 70108	
	(Street)	
Oro Vallev	Arizona	85737
(City)	(State)	(Zip)
(520) 682–9669	(520) 682-9696	(520) 429-8627
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address <u>biannarino@dian</u>	mondven.com	

MANAGEMENT INFORMATION

	(Name)	(Ti	tle)
P.O. Box 70022	Tucson	Arizona	85737
(Street)	(City)	(State)	(Zip)
(520) 904-0741	(520) 297-9494		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Ir	nclude Area Code)
on Site Manager: Chris Hill	(Name)		
On Site Manager: Chris Hill P.O. Box 70022		Arizona	85737
	(Name)	Arizona (State)	85737 (Zip)
P.O. Box 70022	(Name) Tucson		
P.O. Box 70022 (Street)	(Name) Tucson (City)		(Zip)

Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: Kimberly Cady,	L and R Service Co.		
	(Name)		
One South Chruch Avenue #700	Tucson	Arizona	85701
(Street)	(City)	(State)	(Zip)
(520) 622-2090 Telephone No. (Include Area Code)	(520) 622-3088 Fax No. (Include Area Code	Pager/Cell No. (In	nclude Area Code)
Telephone No. (include Area Code)	Pax No. (mende Area Code	I ago./Con 140. (II	icitude Area Code,
Attorney: Lewis & Rocca	(Name)		
	_		
One South Church Avenue #700 (Street)	Tucson (City)	Arizona (State)	85701 (Zip)
	•	,	\ * /
(520) 622-2090 Telephone No. (Include Area Code)	(520) 622-3088 Fax No. (Include Area Code)	Pager/Cell No. (Inc	clude Area Code)
Check the following box that applies to your	r company:		
Check the following box that applies to your	r company:		
Sole Proprietor (S)	C Corporation (C	(Other than Asso	ociation/Co-op)
Partnership (P)	Subchapter S Con	rporation (Z)	
☐ Bankruptcy (B)	Association/Co-op	p (A)	
Receivership (R)	∠ Limited Liability	Company	
Other (Describe)			
<u>C</u>	COUNTIES SERVED		
Check the box below for the county/ies in w	hich you are certificated to pro	ovide service:	
П АРАСНЕ	☐ COCHISE	□ coco	NINO
☐ GILA	☐ GRAHAM	GREE	NLEE
☐ LA PAZ	☐ MARICOPA	□ мона	AVE
☐ NAVAJO	⊠ PIMA	XX PINAI	4
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA	
☐ STATEWIDE			

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	
No.	DECRIPTION	Cost	Depreciation	O.C.L.D.
		(OC)	(AD)	(OC less AD)
351	Organization	0	0	0
352	Franchises	0	0	0
353	Land and Land Rights	0	0	0
354	Structures and Improvements	0	0	0
355	Power Generation Equipment	0	0	0
360	Collection Sewers – Force	0	0	0
361	Collection Sewers - Gravity	0	0	0
362	Special Collecting Structures	0	0	0
363	Services to Customers	0	0	0
364	Flow Measuring Devices	0	0	0
365	Flow Measuring Installations	0	0	0
370	Receiving Wells	0	0	0
380	Treatment and Disposal Equip.	0	0	0
381	Plant Sewers	0	0	0
0382	Outfall Sewer Lines	0	0	0
389	Other Plant and Misc. Equipment	0	0	0
390	Office Furniture and Equipment	0	0	0
391	Transportation Equipment	0	0	0
393	Tools, Shop and Garage Equip.	0	0	0
394	Laboratory Equipment	0	0	0
395	Power Operated Equipment	0	0	0
398	Other Tangible Plant	0	0	0
	TOTALS	0	0	0

This amount goes on the Balance Sheet Acct. No. 108 _____

CALCULATION OF DEPRECIATION EXPENSE

Acet.	·	Original	Depreciation	Depreciation
No.	DESCRIPTION	Cost (1)	Percentage (2)	Expense (1x2)
351	Organization	0	0	0
352	Franchises	0	0	0
353	Land and Land Rights	0	0	0
354	Structures and Improvements	0	0	0
355	Power Generation Equipment	0	0	0
360	Collection Sewers – Force	0	0	0
361	Collection Sewers - Gravity	0	0	0
362	Special Collecting Structures	0	0	0
363	Services to Customers	0	0	0
364	Flow Measuring Devices	0	0	0
365	Flow Measuring Installations	0	0	0
370	Receiving Wells	0	0	0
380	Treatment and Disposal Equip.	0	0	0
381	Plant Sewers	0	0	0
382	Outfall Sewer Lines	0	0	0
389	Other Plant and Misc. Equipment	0	0	0
390	Office Furniture and Equipment	0	0	0
391	Transportation Equipment	0	0	0
393	Tools, Shop and Garage Equip.	0	0	0
394	Laboratory Equipment	0	0	0
395	Power Operated Equipment	0	0	0
398	Other Tangible Plant	0	0	0
	TOTALS	0	0	0

This amount goes on the Comparative Statement of Income and Expense Acct. 403 _____

COMPANY NAME Red Rock Utilities, LLC

BALANCE SHEET

Acct		BALANCE AT BEGINNING OF	BALANCE AT END OF
No.	ASSETS	TEST YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$0	\$0
132	Special Deposits	0	0
135	Temporary Cash Investments	0	0
141	Customer Accounts Receivable	0	0
146	Notes/Receivables from Associated Companies	0	0
151	Plant Material and Supplies	0	0
162	Prepayments	0	0
174	Miscellaneous Current and Accrued Assets	0	0
	TOTAL CURRENT AND ACCRUED ASSETS	\$0	\$0
	FIXED ASSETS		
101	Utility Plant in Service	\$0	\$0
103	Property Held for Future Use	0	0
105	Construction Work in Progress	0	0
108	Accumulated Depreciation – Utility Plant	0	0
121	Non-Utility Property	0	0
122	Accumulated Depreciation – Non Utility	0	0
	TOTAL FIXED ASSETS	\$0	\$0
	TOTAL ASSETS	\$0	\$0

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct	T I A DIT TOTTE	BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR
No.	LIABILITIES		
	CURRENT LIABILITES		
231	Accounts Payable	\$0	\$0
232	Notes Payable (Current Portion)	0	0
234	Notes/Accounts Payable to Associated Companies	0	0
235	Customer Deposits	0	0
236	Accrued Taxes	0	0
237	Accrued Interest	0	0
241	Miscellaneous Current and Accrued Liabilities	0	0
	TOTAL CURRENT LIABILITIES	\$0	\$0
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$0	\$0
	DEFERRED CREDITS		
252	Advances in Aid of Construction	\$0	\$0
253	Other Deferred Credits	0	0
255	Accumulated Deferred Investment Tax Credits	0	0
271	Contributions in Aid of Construction	0	0
272	Less: Amortization of Contributions	0	0
281	Accumulated Deferred Income Tax	0	0
	TOTAL DEFERRED CREDITS	\$0	\$0
	TOTAL LIABILITIES	\$0	\$0
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$0	\$0
211	Other Paid in Capital	0	0
215	Retained Earnings	0	0
218	Proprietary Capital (Sole Props and Partnerships)	0	0
	TOTAL CAPITAL	\$0	\$0
	TOTAL LIABILITIES AND CAPITAL	\$0	\$0

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
521	Flat Rate Revenues	\$0	\$0
522	Measured Revenues	0	0
536	Other Wastewater Revenues	0	0
	TOTAL REVENUES	\$0	\$0
	OPERATING EXPENSES		
701	Salaries and Wages	\$0	\$0
710	Purchased Wastewater Treatment	0	0
711	Sludge Removal Expense	0	0
715	Purchased Power	0	0
716	Fuel for Power Production	0	0
718	Chemicals	0	0
720	Materials and Supplies	0	0
731	Contractual Services – Professional	0	0
735	Contractual Services – Testing	0	0
736	Contractual Services – Other	0	0
740	Rents	0	0
750	Transportation Expense	0	0
755	Insurance Expense	0	0
765	Regulatory Commission Expense	0	0
775	Miscellaneous Expense	0	0
403	Depreciation Expense	0	0
408	Taxes Other Than Income	0	0
408.11	Property Taxes	0	0
409	Income Taxes	0	0
	TOTAL OPERATING EXPENSES	\$0	\$0
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$0	\$0
421	Non-Utility Income	0	0
426	Miscellaneous Non-Utility Expenses	0	0
427	Interest Expense	0	0
	TOTAL OTHER INCOME/EXPENSE	\$0	\$0
	NET INCOME/(LOSS)	\$0	\$0

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
	NA	NA	NA	NA
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan	10000			
Dollar Amount Issued	\$ ^0	\$ 0	\$ 0	\$ 0
Amount Outstanding	\$ 0	\$ 0	\$ 0	\$ 0
Date of Maturity				
Interest Rate	9	6	%	% %
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

WASTEWATER COMPANY PLANT DESCRIPTION

TREATMENT FACILITY

TYPE OF TREATMENT	Information available in Calendar Year 2006 Report
(Extended Aeration, Step Aeration, Oxidation	
Ditch, Aerobic Lagoon, Anaerobic Lagoon,	
Trickling Filter, Septic Tank, Wetland, Etc.)	
DESIGN CAPACITY OF PLANT	
(Gallons Per Day)	

LIFT STATION FACILITIES

Location	Quantity of Pumps	Horsepower Per Pump	Capacity Per Pump (GPM)	Wet Well Capacity (gals)
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA

FORCE MAINS

NA
NA

MANHOLES

Туре	Quantity
Standard	None
Drop	None

CLEANOUTS

	Quantity
NA	
NA	

WASTEWATER COMPANY PLANT DESCRIPTION (CONTINUED)

COLLECTION MAINS

SERVICES

Material	Length (in feet)
NA	NA
	NA

Size (in inches)	Material	Quantity
4	NA	NA
6	NA	NA
8	NA	NA
12	NA	NA
15	NA	NA
-		

FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY

SOLIDS PROCESSING AND HANDLING FACILITIES	Information Available in 2006 Annual Report – Facilities Are Not Installed as of 12-31-2005
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	Information Available in 2006 Annual Report – Facilities Are Not Installed as of 12-31-2005
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	Information Available in 2006 Annual Report – Facilities Are Not Installed as of 12-31-2005
STRUCTURES (Buildings, Fences, Etc.)	Information Available in 2006 Annual Report – Facilities Are Not Installed as of 12-31-2005
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.	Information Available in 2006 Annual Report – Facilities Are Not Installed as of 12-31-2005

WASTEWATER FLOWS

MONTH/YEAR (Most Recent 12 Months)	NUMBER OF SERVICES	TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY
	NA	NA	NA

PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE

Method of Effluent Disposal (leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	Surface Water Discharge
Wastewater Inventory Number (all wastewater systems are assigned an inventory number)	No Inventory # as yet assigned for 2005
Groundwater Permit Number	N/A
ADEQ Aquifer Protection Permit Number	#105621, LTF #36087
ADEQ Reuse Permit Number	TDB - Application in process
EPA NPDES Permit Number	#AZ0025143

STATISTICAL INFORMATION

Total number of customers	0	
Total number of gallons treated	00	gallons

COMPANY NAME	Red Rock	Utilities, LLC	YEAR ENDING 12/31/2005
	IN	ICOME TAXES	
For this reporting period, provid	e the followin	ng:	
Federal Taxable Income Reporte Estimated or Actual Federal Tax		0	
State Taxable Income Reported Estimated or Actual State Tax Li	iability	0 0 0 0	
Amount of Grossed-Up Contribu	itions/Advanc	ces:	
Amount of Contributions/Advan Amount of Gross-Up Tax Collect Total Grossed-Up Contributions	ted	0 0 0	
close of the tax year when tax re are due to any Payer or if any information by Payer: name and	eturns are co y gross-up ta l amount of c	mpleted. Pursuant in ax refunds have all contribution/advance	ny excess gross-up funds collected at the to this Decision, if gross-up tax refunds ready been made, attach the following ce, the amount of gross-up tax collected, expects to make or has made the refund
CERTIFICATION			
in the prior year's annual repor	t. This certif	fication is to be signeral partner, if a pa	Payers all gross-up tax refunds reported ned by the President or Chief Executive artnership; the managing member, if a orship.
SIGNATURE		MAY (1, 280 DATE	<u> </u>
Mark Weinberg PRINTED NAME		Principal TITLE	

COMPANY NAME	Red Rock Utilities, LLC	YEAR ENDING 12/31/2005
	PROPERTY.TA	AXES
Amount of actual property tax	es paid during Calendar Year 20	05 was: \$0
Attach to this annual report pr property tax payments) of any	oof (e.g. property tax bills stamp and all property taxes paid during	ed "paid in full" or copies of cancelled checks for ag the calendar year.
If no property taxes paid, expl	ain why. Red Rock Utilit	ies did not yet hold title to the
facility property in 2	005.	
		

VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED

MAY 1 5 2006

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v r.	к	88 8	٠.,	-		. ,	

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

•	AZ CORPORATION COMMISSION
county of (county name) Pinal County	DIRECTOR OF UTILITIES
NAME (OWNER OR OFFICIAL) TITLE Mark Weinbert, Principal	
COMPANY NAME	
Red Rock Utilities, LLC	

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2005

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

SIGNATURE OF OWNER OR OFFICIAL

(520) 577-0200

TELEPHONE NUMBER

COUNTY NAME

TO A A

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

PIMA

11TH DAY OF

MONTH MAY .2006

(SEAL)

MY COMMISSION EXPIRES

LINDA MASON-FREW Notary Public - Arizona Pima County Viy Commission Expires May 10, 2009 SIGNATURE OF NOTARY PUBLIC

VERIFICATION AND SWORN STATEMENT

Intrastate Revenues Only

RECEIVED

MAY 1 5 2006

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

VER	HFI	CA	TI	ON

STATE OF Arizona

I, THE UNDERSIGNED

Arizona

OF THE

COUNTY OF (COUNTY NAME)
Pinal	County
	33 41137

NAME (OWNER OR OFFICIAL) TITLE

Mark Weinberg

Red Rock Utilities, LLC

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2005

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> UTILITY OPERATIONS DURING CALENDAR YEAR 2005 WAS:

Arizona Intrastate Gross	Operating Revenues Only (\$)
\$0_	

(THE AMOUNT IN BOX ABOVE INCLUDES \$______ IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

DAY OF

SIGNATURE OF OWNER OR OFFICIAL

(520) 577-0200

TELEPHONE NUMBER

COUNTY NAME PIMA

MAY - CHARAGE SENDE

MONTH MAY

, 20<u>0</u>6

(SEAL)

MY COMMISSION EXPIRES

Notury Public - Arizona

Pima County

My Commission Expires

May 10, 2009

VERIFICATION AND **SWORN STATEMENT RESIDENTIAL REVENUE**

RECEIVED

MAY 1 5 2006

VEDIEICATION

INTRASTATE REVENUES ONLY

ON

VERIFICATION	INTRASTATE	EVENCES ONE	
STATE OF Arizona	county of (county NAME) Pinal County		DIRECTOR OF UTILITIES
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) Mark Weinberg		Principal
OF THE	COMPANY NAME Red Rock Utilitie	es, LLC	
DO SAY THAT THIS ANNUA	L UTILITY REPORT T	O THE ARIZO	NA CORPORATION COMMISSION
FOR THE YEAR ENDING	MONTH DAY 12 31	YEAR 2005	
THE SAME, AND STATEMENT OF COVERED BY THE SET FORTH, TO THE SWORN STATEMENT IN ACCORDANCE 401.01, ARIZONA	DECLARE THE S. BUSINESS AND AF. S REPORT IN RESPE- HE BEST OF MY KNO WITH THE REQUIRE REVISED STATUTES.	AME TO BE FAIRS OF SCT TO EACH WLEDGE, IN EMENTS OF TO IT IS HERE	I HAVE CAREFULLY EXAMINED E A COMPLETE AND CORRECT AID UTILITY FOR THE PERIOD AND EVERY MATTER AND THING FORMATION AND BELIEF. FITLE 40, ARTICLE 8, SECTION 40- CIN REPORTED THAT THE GROSS ED FROM ARIZONA INTRASTATE
	TIONS RECEIVED		DENTIAL CUSTOMERS DURING
ARIZONA INTRASTATE GROSS \$0-	OPERATING REVENUES	INCLUDE	OUNT IN BOX AT LEFT S \$0- TAXES BILLED, OR COLLECTED
*RESIDENTIAL REVENUE MUST INCLUDE SALES		AGE X	SIGNATURE OF OWNER OR OFFICIAL (520) 577-0200 TELEPHONE NUMBER
SUBSCRIBED.	AND SWORN TO BEFOR	E ME	NOTARY PUBLIC NAME LINDA MASON - FREW
A NOTARY PU	BLIC IN AND FOR THE	COUNTY OF	COUNTY NAME A
Notary Pr	TASON-FREW ublic - Arizona a County mission Expires	Y OF X	MONTH MAY 2006